

A Family Kitchen, LLC

Cooking Classes
Chef Kristen Phillips

To Be Completed by All Participants

Email completed forms to Chef Kristen at kristen@afamilykitchen.com

Registration Form:

Name of Participant: _____

Preferred Name: _____

Age: _____ Grade: _____ Teacher: _____

Parent Email: _____

Emergency Contact Name: _____

Emergency Phone Number: _____

Authorized Person Picking Up: _____

His/Her Cell Number: _____

Does Participant Have Food Allergies or Dietary Restrictions? YES OR NO

Explain: _____

Allergic Reaction(s): _____

How Did You Hear About This Class? _____

A Family Kitchen, LLC
Waiver & Release of Liability:

I am the parent or legal guardian of _____, a minor (“Participant”). I give permission for the Participant to participate in A Family Kitchen, LLC Cooking Program (collectively the “Activities”). I acknowledge that participating in the Activities may involve certain inherent risks, including the risk of personal injury. I release and discharge A Family Kitchen, LLC and all of its owner(s), employees and affiliates (et al.) from and against any and all damages, actions, claims and liabilities, whether known or unknown, anticipated or unanticipated, suspected or unsuspected, relating to or arising from any activity. I further agree to indemnify, hold harmless, and defend A Family Kitchen, LLC and each of the Released Parties from and against any loss, damage, liability, and expense, including costs and attorneys’ fees incurred by A Family Kitchen, LLC or any of the Released Parties as a result of participating in the Activities.

I expressly agree that this consent is intended to be a broad and an inclusive release of liability as permitted by applicable law and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. I hereby warrant and represent that I am 18 years old or older; I have carefully read this consent and agree to its terms and conditions, and I am aware that by signing this consent, I assume all risks and waive and release certain substantial rights.

I also agree to release, exonerate, discharge and hold harmless A Family Kitchen, LLC and all of its owner(s), employees and affiliates (et al.) from all liability, claims, causes of action, or demands, including attorney fees, fines, fees, or other costs (e.g. medical costs) arising out of any exposure to or illness or injury from an infectious disease including COVID-19, which may result from or in connection with my child’s participation in A Family Kitchen, LLC Activities.

A Family Kitchen, LLC reserves the right to use any photograph, video, voice or likeness taken during A Family Kitchen, LLC Activities for A Family Kitchen, LLC promotional materials, brochures, website, etc.

Signature of Parent or Legal Guardian: _____

Printed Name of Parent or Legal Guardian: _____

Child Participant’s Name: _____

Date: _____